Vacation Rental example: 1234-VR-21





Registration Certificate/Vacation Rental or Home Stay License #:

Transient Occupancy Tax (TOT) Reporting & Remittance Statement-2020-21

Use this form to report and remit TOT for one of the following businesses: hotels and motels, bed and breakfasts, vacation rentals, and home stays.

Use one form per property. If submitting for multiple Vacation Rental units use the TOT Form for Multiple Vacation Rentals.

NOTE: All of these license types must be renewed annually.							
Business/Licensee Name (or Owner Name for Short-Term Rental):							
Business/Short-Term Rental Street Address and Unit #:							
Assessor Parcel Number (APN): (From your Property Tax Bill)							
Mail this form and your tax remittance to:			Owner Name (if not above):				
City of Carpinteria			Owner's Address:				
5775 Carpinteria Avenue			Owner's City, State, Zip:				
Carpinteria, CA 93013			Property Manager, if applicable:				
Pursuant to Carpinteria Municipal Code Chapter 3.20, this form must be completed for each license and submitted with payment on or before each calendar quarter or at the close of any shorter reporting period which may be established by the City Clerk, see table below. the completed for each license and submitted with payment <a are="" city="" due="" due.="" even="" every="" failure="" forms="" href="mailto:on or before the last day of the month following the close of each calendar quarter or at the close of any shorter reporting period which may be established by the City Clerk, see table below. <a href=" in="" license="" mailto:tot="" may="" no="" non-compliance="" non-renewal="" of="" quarter="" quarters="" regulations.<="" remittance="" result="" submit="" taxes="" td="" to="" tot="" where="" with="">							
TOT Remittance Calendar							
	IMPORTANT: ✓ Check the quarter for which you are submitting TOT:		ndated TOT Reporting Period:		OT Remittance Due	Internal Use Only: FY Qtr	
			Jan. 1 – Mar. 31		Apr. 30	Q3	
			Apr. 1 – Jun. 30		Jul. 31	Q4	
			Jul. 1 – Sep. 30 Oct. 1 – Dec. 31		Oct. 31 Jan. 31	Q1 Q2	
		Oth	ner (e.g. back TOT owed)		Jan. Ji		
Calcul	ata Varre Tarr				 		
Calculate Your Tax: A. Enter the total rents received for the period.							
(Includes cleaning fees collected, and includes rents collected for 30+ day occupants)					\$		
B. Allo	wable deductions (see below)**				\$		
C. Subtract line B from line A					\$		
D. Enter 12% of the amount on line C					\$		
E. Enter 10% of line D if paid after due date (for each month past due)				\$			
F. ENTER TOTAL AMOUNT REMITTED (add lines D and E) **ALLOWABLE DEDUCTIONS: Rents received for rooms occupied for more than thirty days by th See CMC Chapter 3.20 UNIFORM TRANSIENT OCCUPANCY TAX for complete information.					\$ ne same tenant by prearrar	nged written agreement.	
I certify under penalty of perjury that all information in this report is, to the best of my knowledge, true, correct and complete:							
Prepared by / Signed: Print name:							
Date: Phone: ()					Email:		